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SECRETARY OF STATE
DIVISION OF CORPORATIONS

T. HAMPTON

SEP - 3 2010

EXAMINER

COVER LETTER

TO: Registration So Division of Con			
SUBJECT:	Premier Fran	ning & Drywall, LLC	
		ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
		Allon Batson	
		Name of Person	
	Premie	er Framing & Drywall, LLC	
		Firm/Company	
	101	Lighthouse Church Rd.	
		Address	10-110-110-110-110-11-110-110-110-110-1
		Baker, FL 32531	
		City/State and Zip Code	
	E-mail address: (to be used for future annual report notification	on)
For further information of	concerning this matter, please of	all:	
	Illon Batson of Person	at (850_)309	5-7756 lephone Number
Enclosed is a check for t	he following amount:		
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Sectificate of Status & Certified Copy (additional copy is enclosed)
	JNG ADDRESS:	STREET/COURIER Registration Section	ADDRESS:

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Premier Framing	& Drywall,	LLC	ون
(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appo	ears on our records.)	J W
(A Florida Ellintea E	naomiy Company	,	SICE
The Articles of Organization for this Limited Liability Company	were filed on _	August 16, 2010	_ and as ned
Florida document numberL10000085645			- 7
			- OR C
This amendment is submitted to amend the following:			CORPORATIONS 2 AMII: 57
A. If amending name, enter the new name of the limited liab	ility company h	ere:	~ <u>~</u> <u>~</u>
5			S
The new name must be distinguishable and end with the words "Limi"L.L.C."	ted Liability Com	npany," the designation "LL	C" or the abbreviation
Enter new principal offices address, if applicable:	1011 Lighth	nouse Church Rd.	
(Principal office address MUST BE A STREET ADDRESS)	Baker, FL 3	32531	
		··	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
interning war ess Mrs DD 111 Oct Of 1102 2011			•
B. If amending the registered agent and/or registered of	fice address or	our records, enter the	e name of the nev
registered agent and/or the new registered office address her		,	-
Name of New Registered Agent:			
N. B. C. LOW, Aller			
New Registered Office Address:		Enter Florida street addre	?SS
	·		
	City	, Florida	Zip Code
	City		enp cour

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

<u>itle</u>	<u>Name</u>	Address	Type of Actio
•			Add Remove
			☐ Add ☐ Remove
			Add Remove
	·		Add Remove
, . 			Add Remove
			Add Remove
. If amen —	ding any other information, enter chang	ge(s) here: (Attach additional sheets, if necessary.)	SECRETONION O
			- -
 ated			AH II: 57

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Filing Fee: \$25.00